UTILITY PATENT APPLICATION TRANSMITTAL

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Attomey Docket No.	862.C1919	<u>J</u>
First Named Inver	ntor or Application Identifier	
ТОМОҮ	UKI MIYASHITA	
Evernor Mail Label No.		

-	TRANSMITTAL	TOMOYUKI MIYASHITA					
(Only I	for new nonprovisional applications under 37 CFR 1.53(b))	Express Mail Label No.					
See M	APPLICATION ELEMENTS APPLICATION ELEMENTS APPLICATION ELEMENTS APPLICATION ELEMENTS	Assistant Commissioner for Patents Box Patent Application Washington, DC 20231					
1. X	Fee Transmittal Form (Submit an original, and a duplicate for fee processing)	6. Microfiche Computer Program (Appendix)					
2. X 3. X 4. X	Specification Total Pages Drawing(s) (35 USC 113) Oath or Declaration Total Pages 1	7. Nucleotide and/or Amino Acid Sequence Submission (if applicable, all necessary) a. Computer Readable Copy b. Paper Copy (identical to computer copy) c. Statement verifying identity of above copies					
·	a. X Newly executed (original or copy)	ACCOMPANYING APPLICATION PARTS					
	b. Unexecuted for information purposes c. Copy from a prior application (37 CFR 1.63(d)) (for continuation/divisional with Box 17 completed) [Note Box 5 below] i. DELETION OF INVENTOR(S) Signed Statement attached deleting inventors	10. English Translation Document (if applicable) Information Disclosure X Copy of					
5.	named in the prior application, see 37 CF 1.63(d)(2) and 1.33(b). Incorporation By Reference (useable if Box 4c is checked) The entire disclosure of the prior application, from which a copy oath or declaration is supplied under Box 4c, is considered as be part of the disclosure of the accompanying application and is her incorporated by reference therein.	Statement (IDS)/PTO-1449 document 12. Preliminary Amendment Return Receipt Postcard (MPEP 503) (Should be specifically itemized)					
17. If a (17. If a CONTINUING APPLICATION, check appropriate box and supply the requisite information:						
	Continuation Divisional Continuation-in-part (CIP) of prior application No.						
	18. CORRE	SPONDENCE ADDRESS					
×	X Customer Number or Bar Code Label 05514 or Correspondence address below (Insert Customer No. or Attach bar code label here)						
NAME							
Address							
City	State	Zip Code					
Country	Telephone	Fax					

CLAIMS	(1) FOR	(2) NUMBER FILED	(3) NUMBER EXTRA	(4) RATE	(5) CALCULATIONS
	TOTAL CLAIMS (37 CFR 1.16(c))	24-20 =	4	X \$ 18.00 =	\$ 72.00
	INDEPENDENT CLAIMS (37 cfr 1.16(b))	12-3 =	9	X \$ 78.00 =	\$ 702.00
	MULTIPLE DEPENDENT C	LAIMS (if applicable) (37 CFR 1.1	16(d))	\$260.00 =	\$ O
		4 · · · · · · · · · · · · · · · · · · ·		BASIC FEE (37 CFR 1.16(a)	
	-		Total	of above Calculations	= \$ 1,464.00
	Reduction t	by 50% for filing by small ent	ity (Note 37 CFR 1.9, 1.2)	7, 1.28).	
				TOTAL =	\$ 1.464.00
19. Sm a.		ty statement is enclosed			
_	A Small enti A small enti Is no longer claimed. A check in the amount	ty statement was filed in the	er the filing fee is enclosed		s still proper and desired
a. b. 20. X	A Small enti A small enti Is no longer claimed. A check in the amount A check in the amount C A check in the amount	ty statement was filed in the to f $\frac{1,464.00}{1}$ to cover the thorized to credit overpayments.	er the filing fee is enclosed recordal fee is enclosed.	I.	
a. b. 20. X	A Small enti A small enti A small enti Is no longer claimed. A check in the amount A check in the amount C A check in the amount E Commissioner is hereby aut X Fees require	ty statement was filed in the	er the filing fee is enclosed recordal fee is enclosed.	I.	

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT REQUIRED		
NAME	Brian L. Klock, Reg. No. 36,570	
SIGNATURE	Ji J. Abort	
DATE	June 6, 2000	

BLK/fdb